

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s)

1 so et al
Waldmann, T., et al.

Group Art Unit:

Serial No.

Examiner:

Filed

June 7, 1995

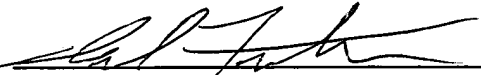
For

METHOD FOR TREATING MALIGNANCY AND AUTOIMMUNE
DISORDERS IN HUMANSEXPRESS MAIL CERTIFICATEExpress Mail Label No. EG882814607USDate of Deposit June 7, 1995

I hereby certify that the following attached paper(s) or fee

1. Patent Application (55 pages of Specifications, 1 page of Abstract, 3 pages of Claims, 11 Pages of Drawings)
2. Application Fee Transmittal
3. Check for \$840.00
4. Return postcard

is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. §1.10 on the date indicated above and is addressed to the Commissioner of Patents and Trademarks, Washington, D.C. 20231.

Israel Fuentes(Typed or printed name of person
mailing paper(s) or fee)June 7, 1995
(Signature of person mailing
paper(s) or fee)

Mailing Address:

MORGAN & FINNEGAN, L.L.P.
345 Park Avenue
New York, New York 10154
(212) 758-4800
(212) 751-6849 Telecopier

FORM: EXP-MAIL.NY
Rev. 3/27/95

[X] The Assistant Commissioner is hereby authorized to charge any additional fees which may be required for filing this application, or credit any overpayment to Deposit Account No. 13-4500. Order No. 2026-4003US3. A DUPLICATE COPY OF THIS SHEET IS ATTACHED.

I. CALCULATION OF APPLICATION FEE (For Other Than A Small Entity)

	Number Filed	Number Extra	Rate	Basic Fee
				\$ 730.00
Total				
Claims	25	-20=	x\$22.00	\$ 110.00
Independent				
Claims	3	- 3=	X\$76.00	\$
Multiple	[] yes	Add'l Fee \$240.00		
Dependent				
Claim(s)	[] no	Add'l Fee NONE		=
				Total: \$ 840.00

II. CALCULATION OF APPLICATION FEE (For A Small Entity)

	Number Filed	Number Extra	Rate	Basic Fee
				\$365.00
Total*				
Claims		-20=	x\$11.00	\$
Independent				
Claims		- 3=	x\$38.00	\$
Multiple	[] yes	Add'l Fee \$120.00		
Dependent				
Claim(s)	[] no	Add'l Fee NONE		= \$
				Total: \$

Respectfully submitted,

MORGAN & FINNEGAN, L.L.P.

By:

Dorothy R. Auth

Registration No. 36,434

Dated: June 7, 1995

Mailing Address:

MORGAN & FINNEGAN, L.L.P.
345 Park Avenue
New York, New York 10154
(212) 758-4800
(212) 751-6849 Telecopier

* Includes all independent and single dependent claims and all claims referred to in multiple dependent claims. See 37 C.F.R. § 1.75(c).

FORM: APP-TRAN.NY
Rev. 4/12/95

IN THE UNITED STATES PATENT AND TRADEMARK OFFICEAPPLICATION FEE TRANSMITTAL

ASSISTANT COMMISSIONER FOR PATENTS
Washington, D.C. 20231

Sir:

Transmitted herewith for filing is the patent application of

Inventor(s): Thomas A. Waldmann, Ira Pastan and Robert J. Kreitman

For: METHOD FOR TREATING MALIGNANCY AND AUTOIMMUNE DISORDERS IN
HUMANS

Enclosed are:

- ☒ 55 page(s) of specification
- ☒ 1 page(s) of Abstract
- ☒ 3 page(s) of claims
- ☒ 11 sheets of drawing ☐ formal ☒ informal
- ☐ _____ page(s) of Declaration and Power of Attorney
- ☐ _____ page(s) of Sequence Listing
- ☐ _____ computer disk(s) containing Sequence Listing
- ☐ _____ statement under 37 C.F.R. § 1.821(f) that computer and paper copies of the Sequence Listing are the same
- ☒ A check in the amount of \$ 840.00 to cover the application filing fee For Other Than A Small Entity as determined in the Part I Calculation of Fees below.
- ☐ Verified Statement of "Small Entity" Status Under 37 C.F.R. §1.27 Filed _____.
- ☐ A check in the amount of \$ _____ to cover the application filing fee for A Small Entity as determined in the Part II Calculation of Fees below.
- ☐ An assignment of the invention to _____.
- ☐ A check in the amount of \$40.00 for recording the Assignment.

AUTHORIZATION TO CHARGE DEPOSIT ACCOUNT

- ☐ Charge Fee to Deposit Account No. 13-4500. Order No. _____. A DUPLICATE COPY OF THIS SHEET IS ATTACHED.